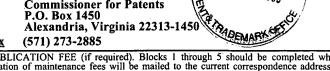
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450





APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/645,826 08/20/2003 Spencer B. Dick PAI 310 7661  FITLE OF INVENTION: PROCESS MANAGEMENT SYSTEM AND METHOD  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 02/14/2006  EXAMINER ART UNIT CLASS-SUBCLASS  BAHTA, KIDEST 2125 700-117000  C. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list	•	•			Fax (571) 273-288		DEMARK
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KOLISCH HARTWELL, P.C. 200 PACIFIC BUILDING 200 YAMHILL STREET PORTLAND OR 97204 200 SESSE2 0000002 1645266 12501 700.00 0P  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 16164526 0820/2003 Spencer B. Dick PLATE OF VARI Ryspée ple right in Comprovisional VES 5700 SS 5700 02/14/2006  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 16164526 0820/2003 Spencer B. Dick PAI 310 7661  TITLE OF INVENTION: PROCESS MANAGEMENT SYSTEM AND METHOD  APPLA TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES 5700 S 5700 02/14/2006  EXAMINER ART UNIT CLASS-SUBCLASS BAHTA, KIDEST 2125 700-117000  C. Change of correspondence address or indication of "Fee Address" Indication of "Fee		·	any change of address)		Note: A certificate Fee(s) Transmittal papers. Each addinate its own certif	e of mailing can only be used . This certificate cannot be used tional paper, such as an assignation of mailing or transmission	for domestic mailings of d for any other accompan ment or formal drawing, 1 1.
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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/645,826 08/20/2003 Spencer B. Dick PAI 310 7661  TITLE OF INVENTION: PROCESS MANAGEMENT SYSTEM AND METHOD  APPLN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES 5700 02/14/2006  EXAMINER ART UNIT CLASS-SUBCLASS BAHTA, KIDEST 2125 700-117000  Change of correspondence address or indication of "Fee Address" (37 CFR 1,363).  Change of correspondence address or indication of "Fee Address" (37 CFR 1,363).  Change of correspondence address or indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Customer PTO/SB/47; Rev 03-02 or more recent) attached use of a Substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASEN DOTE Unless an assignee as is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR CO	1/5000 22F2HF5 00000	V2V 1V643826			Prerie Ci	van Rysserbergi	1E (Depositor's n
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BAHTA, KIDEST  2125  700-117000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of correspondence address form PTO/SB/122) attached.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Precision Automation, Inc.  Vancouver, Washington  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the Country of this form).  A check in the amount of the fee(s) is enclosed:  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  A check in the amount of the fee(s) is enclosed.  The Director is hereby authorized by charge the required fee(s), or credit any overpaymer (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other partners as shown by the records of the United States Patent and Tragmark Office.	nonprovisional	YES	\$700	•	\$0	\$700	02/14/2006
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Precision Automation, Inc.  Vancouver, Washington  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governmental Corporation or other private group entity Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Advance Order - # of Copies Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment peposit Account Number (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other parenterest as shown by the records of the United States Patent and Trademark Office.  Date February 14, 2006						signee is identified below, the	document has been filed
Please check the appropriate assignee category or categories (will not be printed on the patent):	(A) NAME OF ASSIGN	EE	(B	) RESIDENO	CE: (CITY and STATE OR	COUNTRY)	
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